

# Work Order ID 107995

\*107995\*

Page 1

October-07-13 9:06:03 AM

Item ID: D2893-1

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Support

Start Date: 10/07/13 Start Qty: 12.00

\*12\*

Cust Item ID:

Required Date: 10/07/13 Req'd Qty: 12.00

\*12\*

Customer:

Reference:

Approvals: Process Plan: MJS Date: 13-10-08

Tooling:

Date:

Run Start \*NR1\*

QC: Date:

SPC (Y/N):

Date:

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D2893	C								
100		0.00							
*100*	HAAS CNC VERTICAL MACHINING #1								
HAAS 1	Memo	0.00							
HAAS CNC vertical machine #1	1-Machine as per Folio FA081 2-Deburr								
110		0.00							
*110*	QC2- Inspect parts off machine FAI/FAIB								
QC	Memo	0.00							
Quality Control									
120		0.00							
*120*	QC8- Inspect parts - second check								
QC	Memo	0.00							
Quality Control									

DR/B.A. 13/10/25 D40 028 13 10 26 (x12)

DR/B.A. 13/10/25 D40 028 13 10-26 (x12)

12 13-10-28

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

**\*107995\***

October-07-13 9:06:03 AM

**Accept**

**\*N900040100\***

Setup Start \*NS1\*

Stop \*NS2\*

**Item Name:** Support

**Start Date:** 10/07/13      **Start Qty:** 12.00

**\*12\***

**Cust Item ID:**

**Required Date:** 10/07/13      **Req'd Qty:** 12.00

\*12\*

**Customer:**

**Reference:**

Run Start \*NR1\*

**Approvals:** \_\_\_\_\_ **Process Plan:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Tooling:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Stop \*NR2\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

**Insp.  
Stamp**

130

0.00

**\*130\***

0.00

HandFXtube

## Memo

### Hand Finishing Crosstubes

Per note 8 on page 1 of dwg D2893, Prep inner concave surface of support and apply 3M Scotch-Weld as per dwg.  
24h of cure time.

140

### QC3- Inspect Part Finish

0.00

**\*140\***

0.00

QC

## Memo

## Quality Control

170

Identify as per dwg & Stock Location: LG52

0.00

**\*170\***

0.00

### Packaging

## Memo

## Packaging

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions  <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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# Work Order ID 107995

**\*107995\***

Page 3

October-07-13 9:06:03 AM

Item ID: D2893-1

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Support

Start Date: 10/07/13 Start Qty: 12.00 **\*12\***

Cust Item ID:

Required Date: 10/07/13 Req'd Qty: 12.00 **\*12\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
180	QC21- Final Inspection - Work Order Release	0.00							
<b>*180*</b>									
QC	Memo	0.00							
Quality Control									

13/12/13 *[Signature]*

13-12-5

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

### FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# Picklist Print

October-07-13 9:06:02 AM

Page 1

Work Order ID: 107995

Parent Item: D2893-1

Parent Item Name: Support

Start Date: 10/07/13

Required Date: 10/07/13

Start Qty: 12.00

Required Qty: 12.00

## Comments:

IPP: C02.11.26Reformat; Added P/OKJ

IPP D 06.04.19 removed alodine EC

IPP Rev:E Added priming as per Rev B 07-04-30 JLM

IPP F 08.03.19 Re-format EC verified by: DD

IPP Rev:G 08-05-15 add QC14 DD verified by:EC

rev.C DD verf:EC

IPP Rev:H 11.08.04 as per dwg

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
DSK078		Manufactured	No			100	Each	6.0000	0.5	6.3157896			

D2893-1 Turning Detail

## Location

MAT060

103581

## Loc Qty

6

6

## Loc Code

ET 13-10-18

KG

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY			
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other



<b>DART AEROSPACE LTD</b>		<b>Work Order:</b>	107995
<b>Description: Ø2.750 Support</b>		<b>Part Number:</b>	D2893-1
<b>Inspection Dwg: D2893</b>		<b>Rev: C</b>	<b>Page 1 of 1</b>

### FIRST ARTICLE INSPECTION DIMENSION SHEET

				Record Actual Dimensions				
Dim	Min	Max	Go/No Go Gauge	1	2	3	4	5
<b>HAAS Section</b>								
AA	2.985	3.005		2.998	2.998	2.996	2.995	2.975
AB	0.440	0.460		.445	.441	.450	.450	.450
AC	0.125	0.160		.145	.145	.146	.135	.135
AD	0.040	0.060		.051	.055	.051	.056	.056
AE	0.188	0.193		.190	.191	.191	.192	.192
AF	0.125	0.160		.135	.135	.140	.143	.138
AG	0.140	0.160		.150	.150	.150	.150	.153
AH	1.360	1.400		1.386	1.388	1.376	1.371	1.375
AI	0.040	0.060		.054	.053	.054	.050	.050
AJ	1.190	1.230		1.234	1.230	1.217	1.214	1.214
AK	0.010	0.020		.010	.010	.010	.010	.010
AL	0.053	0.073		.0625	.0625	.0625	.063	.063
AM	0.240	0.260		.250	.250	.250	.250	.250
AN	2.518	2.538		2.523	2.526	2.524	2.526	2.528
AO	84.39	90.39		87.39	87.39	87.39	87.39	87.39
AP	0.261	0.266		.261	.261	.261	.263	.263
AQ	0.053	0.073		.0625	.0625	.0625	.063	.063
AR								
AS								
AT								
<b>Accept/Reject</b>								

<b>Measured by:</b> DP / A.A	<b>Date:</b> 13/10/25
<b>Audited by:</b> J	<b>Date:</b> 10/25/13
<b>Preliminary Approval:</b>	<b>Date:</b> 13-10-28
<b>Preliminary Approval:</b>	<b>Date:</b>

Rev	Date	Change	Revised by	Approved
A	02.12.13	New Issue	KJ/RF	
B	07.05.08	Dimension AP revised	KJ/JLM	
C	08.04.21	Reformat	KJ/JLM	
D	12.07.31	Dwg Rev updated	KJ	



<b>DART AEROSPACE LTD</b>		<b>Work Order:</b> 107995
<b>Description: Ø2.750 Support</b>		<b>Part Number:</b> D2893-1
<b>Inspection Dwg: D2893</b>	<b>Rev: C</b>	<b>Page 1 of 1</b>

### FIRST ARTICLE INSPECTION DIMENSION SHEET

				Record Actual Dimensions				
Dim	Min	Max	Go/No Go Gauge	6	7	8	9	10
HAAS Section								
AA	2.985	3.005		2.995	2.995	2.995	2.995	2.995
AB	0.440	0.460		.450	.450	.450	.450	.450
AC	0.125	0.160		.135	.137	.135	.133	.131
AD	0.040	0.060		.055	.052	.053	.050	.050
AE	0.188	0.193		.192	.192	.192	.192	.192
AF	0.125	0.160		.138	.138	.139	.143	.141
AG	0.140	0.160		.150	.150	.151	.153	.149
AH	1.360	1.400		1.377	1.377	1.376	1.375	1.378
AI	0.040	0.060		.048	.050	.052	.050	.052
AJ	1.190	1.230		1.219	1.219	1.217	1.215	1.222
AK	0.010	0.020		.010	.010	.010	.010	.010
AL	0.053	0.073		.063	.063	.063	.063	.063
AM	0.240	0.260		.250	.250	.250	.250	.250
AN	2.518	2.538		2.528	2.528	2.528	2.528	2.528
AO	84.39	90.39		87.39	87.39	87.39	87.39	87.39
AP	0.261	0.266		.263	.263	.263	.263	.263
AQ	0.053	0.073		.063	.063	.063	.063	.063
AR								
AS								
AT								
Accept/Reject								

<b>Measured by:</b> D. 8/1/15	<b>Date:</b> 13-10-26
<b>Audited by:</b> SL	<b>Date:</b> 13-10-28
<b>Preliminary Approval:</b>	<b>Date:</b>

Rev	Date	Change	Revised by	Approved
A	02.12.13	New Issue	KJ/RF	
B	07.05.08	Dimension AP revised	KJ/JLM	
C	08.04.21	Reformat	KJ/JLM	
D	12.07.31	Dwg Rev updated	KJ	

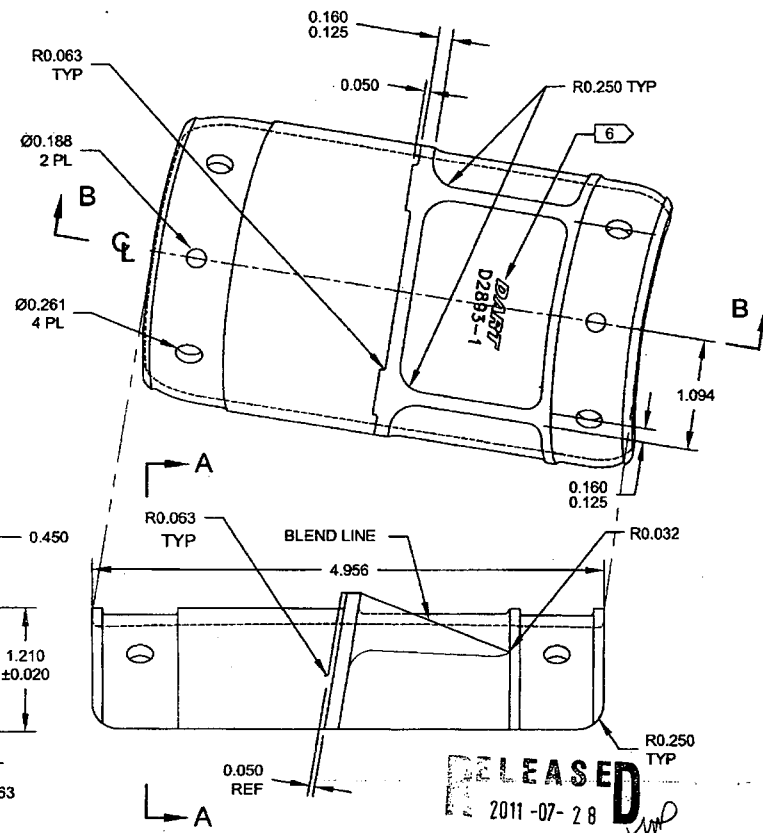
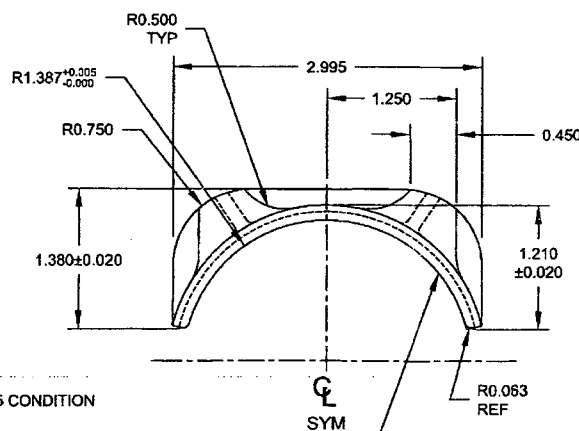
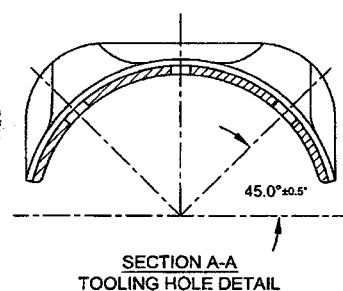
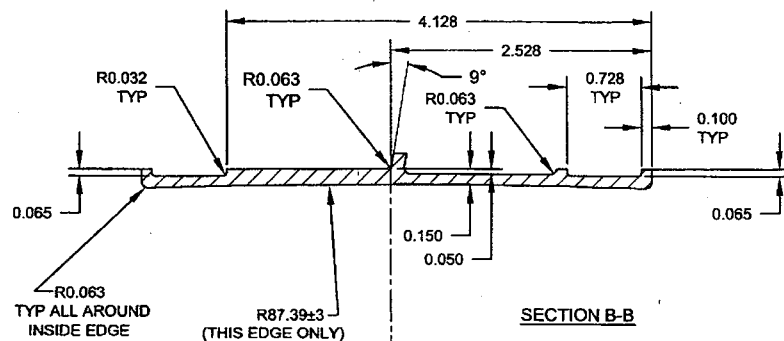
<b>DART AEROSPACE LTD</b>		<b>Work Order:</b>	107995
<b>Description: Ø2.750 Support</b>		<b>Part Number:</b>	D2893-1
<b>Inspection Dwg: D2893</b>		<b>Rev: C</b>	<b>Page 1 of 1</b>

### FIRST ARTICLE INSPECTION DIMENSION SHEET

				Record Actual Dimensions				
Dim	Min	Max	Go/No Go Gauge	1	2	3	4	5
HAAS Section								
AA	2.985	3.005		2.995	2.995			
AB	0.440	0.460		.440	.450			
AC	0.125	0.160		<del>1.135</del>	.163			
AD	0.040	0.060		.051	.051			
AE	0.188	0.193		.192	.192			
AF	0.125	0.160		.141	.141			
AG	0.140	0.160		.150	.150			
AH	1.360	1.400		1.373	1.375			
AI	0.040	0.060		.052	.051			
AJ	1.190	1.230		1.218	1.214			
AK	0.010	0.020		.010	.010			
AL	0.053	0.073		.063	.063			
AM	0.240	0.260		.250	.250			
AN	2.518	2.538		2.526	2.526			
AO	84.39	90.39		87.39	87.39			
AP	0.261	0.266		.263	.263			
AQ	0.053	0.073		.063	.063			
AR								
AS								
AT								
Accept/Reject								

<b>Measured by:</b> D1	<b>Date:</b> 13-10-26
<b>Audited by:</b> SL	<b>Date:</b> 13-10-28
<b>Preliminary Approval:</b>	<b>Date:</b>

Rev	Date	Change	Revised by	Approved
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# NOTES:

- 1) MATERIAL: 17-4 PH STAINLESS STEEL, H900 OR H925 CONDITION  
MIN UTS = 170 KSI (38 HRc)  
(REF DART SPEC. D6104)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 (REF X.XXX = ±0.010) UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: DART LOGO (PER DART SUPPLIED GRAPHIC) AND PART NUMBER IN THIS AREA WITH 0.125 HIGH LETTERING 0.010-0.020 DEEP, PER DART QSI 044 6.3.
- 7) WEIGHT: 0.78 lb
- 8) FOR THE ENTIRE INNER CONCAVE SURFACE:  
ABRADE SURFACE WITH 400-GRIT SANDPAPER. REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY 0.03" TO 0.05" THICK LAYER OF 3M SCOTCH-WELD 2216 B/A ADHESIVE TO MATING SURFACE OF SUPPORT. ALLOW TO CURE FOR 24 HOURS.

## D2893-1 SUPPORT

C	RMV FINISH, ADD 3M 2216, ADD H925 MAT'L OPTION	CP	11.07.15
B	UPDATE DIMS AS MFG, PRIME INSIDE	PH	07.03.16
A	NEW ISSUE	CP	01.01.10
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	11.07.15		

<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWING NO. D2893	REV. C SHEET 1 OF 1
TITLE Ø2.750 SUPPORT	SCALE NTS

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107995 MLS  
13-10-08